

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	Bm	WGEV	05-25-01
FORMALITY REVIEW	MD	579 7/20/01	6/8/01
RESPONSE FORMALITY REVIEW	TA	1113	10-20-01
	Rm	F81	02-03-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	07-25-01
1	07-25-01
2	07-25-01
3	07-25-01
4	07-25-01
5	07-25-01
6	07-25-01
7	07-25-01
8	07-25-01
9	07-25-01
10	07-25-01
11	07-25-01
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41	07-25-01
42	07-25-01
43	07-25-01
44	07-25-01
45	07-25-01
46	07-25-01
47	07-25-01
48	07-25-01
49	07-25-01
50	07-25-01

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
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4-5745  
 20/01  
 10/31/01  
 395  
 10/31/01